

Court name and street address:

Superior Court of California, County of

Case Number:

1 Name of person who asked for the order (protected person):

2 Your name: _____

Your address (*skip this if you have a lawyer*): (*If you want your address to be private, give a mailing address instead*):

City: _____ State: _____ Zip: _____

Your phone # (*optional*): (_____) _____

Your lawyer (*if you have one*): (*Name, address, phone #, and State Bar #*):

Give the judge your answers to DV-100:

☐ **Personal Conduct Orders**

3 I ☐ do ☐ do not agree to the order requested.

☐ **Stay-Away Order**

4 I ☐ do ☐ do not agree to the order requested.

☐ **Move-Out Order**

5 I ☐ do ☐ do not agree to the order requested.

☐ **Child Custody**

6 a. I ☐ do ☐ do not agree to the custody order requested.

b. ☐ I am not the parent of the child listed in DV-105.

c. ☐ I ask for the following custody order (*specify*): _____

d. ☐ I ☐ do ☐ do not agree to the orders requested to prevent child abduction.

☐ **Visitation**

7 a. I ☐ do ☐ do not agree to the visitation order requested.

b. ☐ I ask for the following visitation order (*specify*): _____

☐ **Child Support**

8 a. I ☐ do ☐ do not agree to the order requested.

b. ☐ I agree to pay guideline child support.

You must fill out, serve, and file Form FL-150 or FL-155.

☐ **Record Unlawful Communications**

9 I ☐ do ☐ do not agree to the order requested.

The judge can consider your Answer at the hearing. Write your hearing date and time here:

**Hearing
Date**

Date: _____ Time: _____

Dept.: _____ Room: _____

You must obey the orders until the hearing.

If you do not come to this hearing, the judge can make the orders last for 3 years or longer.

Your name: _____

10 ☐ **Property Control**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***11** ☐ **Debt Payment**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***12** ☐ **Property Restraint**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***13** ☐ **Attorney Fees and Costs**I ☐ do ☐ do not agree to the order requested.**14** ☐ **Payments for Costs and Services**I ☐ do ☐ do not agree to the order requested.**15** ☐ **Batterer Intervention Program**I ☐ do ☐ do not agree to the order requested.**16** ☐ **Other Orders** (see Item 19 on Form DV-100)I ☐ do ☐ do not agree to the order requested.**17** ☐ **Turn in Guns or Other Firearms**a. ☐ I do not own or have any guns or firearms.b. ☐ I ☐ do ☐ do not agree to the order requested.c. ☐ I ☐ have ☐ have not turned in my guns to the police or a licensed gun dealer.d. ☐ A copy of the receipt ☐ is attached. ☐ has already been filed with the court.*You must file a receipt with the court within 72 hours after receiving DV-110.***18** ☐ **I ask the court to order payment of my**a. ☐ Attorney feesb. ☐ Out-of-pocket expenses because the temporary restraining order was issued without enough supporting facts. The expenses are:

Item: _____ Amount: \$ _____ Item: _____ Amount: \$ _____

*You must fill out, serve, and file Form FL-150.***19** ☐ **My answer to the statements in DV-100 and other requests***Please attach your statement. Write "DV-120, Item 19 — More Information" at the top. Be specific.***20** I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

Type or print your name_____
Sign your name